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December 28, 2010

Ms. Alexandra T. Broomhead
Senior Campaign Finance Analyst
Reports Analysis Division
Federal Election Commission
999 E Street, NW
Washington DC 20463

Dear Ms. Broomhead:

Re: United Food and Commercial Workers International Union
Working Families Advocacy Project
I.D. Number C00484253
Amended July Monthly Report (6/1/10 – 6/30/10)

In accordance with the December 22, 2010 telephone conversation between you and Reginald Malley of this office, please find attached copies of the 24-hour Schedule E report that was filed with the Commission via facsimile (fax) on June 3, 2010, as well as copies of the fax cover sheet and fax transmission verification report. According to VOCUS, our PAC organization software provider, the FEC software does not allow for attachments to Form 99 submissions. You will note on the fax confirmation report that the fax was successfully transmitted on June 3, 2010. As you are aware, the United Food and Commercial Workers International Union Working Families Advocacy Project had not yet been issued the requisite authorization information to be able to file the 24-hour Schedule E report electronically on June 3, 2010, and therefore, we were able to submit the report timely only via fax.

I understand that you also requested that the committee submit the June 3 Schedule E report electronically, as well as submit on Form 99 a description of the circumstances related to the committee's original Schedule E filing. We have made the requested Form 99 submission. We are also accommodating the request to re-file the Schedule E electronically at this time. However, we are doing so with the specific understanding that this does not constitute a late filing of that report, but rather is being done as a convenience to the Commission so that it appears on the committee's segment of the Commission's website as a separate filing. We ask that the Commission arrange that this electronic filing be displayed as having been timely filed when it was, on June 3. We suggest that the most appropriate course would be to post

Ms. Alexandra T. Broomhead

December 28, 2010

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the attached copy of the actual faxed report alone as a June 3 filing on the Committee's segment of the website. In no event should the electronic filing be treated as a late filing.

Please contact my office at 202-223-3111, should you require any additional information regarding this matter.

With kind regards, I remain

Sincerely,

Anthony M. Perrone
International Secretary-Treasurer

Enclosures

11030532439

TRANSMISSION VERIFICATION REPORT

TIME : 06/03/2010 15:37
NAME : UFCW INT'L. UNION
FAX : 12024661515
TFI :

DATE, TIME
FAX NO./NAME
DURATION
PAGE(S)
RESULT
MODE

06/03 15:37
00:01:06
08
OK
STANDARD
ECM



FAX

To: Federal Election Commission
Date: 6/3/2010
Telephone number: _____
Destination fax number: 202 219-3496

Number of pages: 8, including cover page.

Message: Schedule E attached Re: C00484253 United Food and
Commercial Workers Working Families Advocacy Project

11030532440



FAX

To: Federal Election Commission

Date: 6/3/2010

Telephone number: _____

Destination fax number: 202 219-3496

Number of pages: 8, including cover page.

Message: Schedule E attached Re: C00484253 United Food and
Commercial Workers Working Families Advocacy Project

From: Carol Rentz

UFCW voice: 202-223-3111

UFCW fax: 202-466-1515

United Food and Commercial Workers International Union
1775 K Street, NW
Washington DC 20006

11030532441

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 7
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers Working Families Advocacy Project	FEC IDENTIFICATION NUMBER ▼ C 00484253
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee BW Inn and Suites	Date MM / DD / YY 06 / 02 / 2010
Mailing Address 5219 Cross Road Parkway	Amount 4,441.87
City State Zip Code Texarkana AR 71854	

Purpose of Expenditure Hotel	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Run-off	
Calendar Year-To-Date Per Election for Office Sought 38,512.75			

Full Name (Last, First, Middle Initial) of Payee BW Inn and Suites	Date MM / DD / YY 06 / 02 / 2010
Mailing Address 5219 Cross Road Parkway	Amount 4,441.88
City State Zip Code Texarkana AR 71854	

Purpose of Expenditure Hotel	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Blanche Lincoln		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Run-off	
Calendar Year-To-Date Per Election for Office Sought 38,512.75			

(a) SUBTOTAL of Itemized Independent Expenditures	8,883.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	8,883.75

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____

Date _____

11030532442

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 7
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers Working Families Advocacy Project	FEC IDENTIFICATION NUMBER ▼ C 00484253
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee Alamo Rent A Car	Date MM / DD / YY 06 / 02 / 2010
Mailing Address P.O. Box 198154	Amount 378.18
City State Zip Code Atlanta GA 30384-8154	

Purpose of Expenditure Car Rental	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 38,512.75		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off

Full Name (Last, First, Middle Initial) of Payee Alamo Rent A. Car	Date MM / DD / YY 06 / 02 / 2010
Mailing Address P.O. Box 198154	Amount 378.18
City State Zip Code Atlanta GA 30384-8154	

Purpose of Expenditure	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Blanche Lincoln		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 38,512.75		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off

(a) SUBTOTAL of Itemized Independent Expenditures	756.36
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	9,640.11

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____

Date _____

11030532443

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 7
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers Working Families Advocacy Project	FEC IDENTIFICATION NUMBER C 00484253
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 2	Date 06 02 2010
Mailing Address 1305 East 27th Street	Amount 5,261.99
City State Zip Code Kansas City MO 64108	

Purpose of Expenditure Salaries, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off	
Calendar Year-To-Date Per Election for Office Sought 38,512.75			

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 2	Date 06 02 2010
Mailing Address 1305 East 27th Street	Amount 5,261.99
City State Zip Code Kansas City MO 64108	

Purpose of Expenditure Salaries, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Blanche Lincoln		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off	
Calendar Year-To-Date Per Election for Office Sought 38,512.75			

(a) SUBTOTAL of Itemized Independent Expenditures	10,523.98
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	20,164.09

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date _____

11030532444

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 OF 7
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers Working Families Advocacy Project	FEC IDENTIFICATION NUMBER ▼ C 00484253
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 1564	Date 06 02 2010
Mailing Address P.O. Box 80390	Amount 1,182.59
City Albuquerque NM State NM Zip Code 87198	

Purpose of Expenditure Salaries, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 38,512.75		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 1564	Date 06 02 2010
Mailing Address P.O. Box 80390	Amount 1,182.59
City Albuquerque NM State NM Zip Code 87198	

Purpose of Expenditure Salaries, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Blanche Lincoln		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 38,512.75		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off

(a) SUBTOTAL of Itemized Independent Expenditures.....	2,365.18
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures.....	22,529.27

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____

Date _____

11030532445

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 OF 7
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers Working Families Advocacy Project	FEC IDENTIFICATION NUMBER ▼ C 00484253
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 655	Date 06 / 02 / 2010
Mailing Address 300 Weidman Road	Amount 1,627.33
City Ballwin MO 63011-4433 State Zip Code	

Purpose of Expenditure Salary, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 38,512.75		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off	

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 655	Date 06 / 02 / 2010
Mailing Address 300 Weidman Road	Amount 1,627.62
City Ballwin MO 63011-4433 State Zip Code	

Purpose of Expenditure Salary, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Blanche Lincoln		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 38,512.75		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off	

(a) SUBTOTAL of Itemized Independent Expenditures	3,255.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	25,784.52

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____

Date _____

11030532446

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 6 OF 7
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers Working Families Advocacy Project	FEC IDENTIFICATION NUMBER C 00484253
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 1000	Date 06 02 2010
Mailing Address 967 W. Wall Street, Suite 120	Amount 2,664.13
City Grapevine TX State Zip Code 76051	

Purpose of Expenditure Salary; wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 38,512.75		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 1000	Date 06 02 2010
Mailing Address 967 W. Wall Street, Suite 120	Amount 2,664.13
City Grapevine TX State Zip Code 76051	

Purpose of Expenditure Salary, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Blanche Lincoln		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 38,512.75		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off

(a) SUBTOTAL of Itemized Independent Expenditures	5,328.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	31,112.78

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date _____

11030532447

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 7 OF 7
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers Working Families Advocacy Project	FEC IDENTIFICATION NUMBER ▼ C 00484253
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 2008	Date 06 02 2010
Mailing Address 7924 Interstate 30, Suite A	Amount 3,699.98
City Little Rock AR State AR Zip Code 72209-2900	

Purpose of Expenditure Salaries, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose

Calendar Year-To-Date Per Election for Office Sought 38,512.75	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off
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Full Name (Last, First, Middle Initial) of Payee UFCW Local No. 2008	Date 06 02 2010
Mailing Address 7924 Interstate 30, Suite A	Amount 3,699.99
City Little Rock AR State AR Zip Code 72209-2900	

Purpose of Expenditure Salaries, wages and travel expenses	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Blanche Lincoln		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose

Calendar Year-To-Date Per Election for Office Sought 38,512.75	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Run-off
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(a) SUBTOTAL of Itemized Independent Expenditures	7,399.97
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	38,512.75

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.


Anthony M. Berane
 Signature

Date **06/03/2010**

11030532448

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 12/29/10
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2005)

1/7/11
DATE PREPARED

11030532449